

# **VICTOR KHANYE**

#### LOCAL MUNICIPALITY - PLAASLIKE MUNISIPALITEIT - MASIPALA

6 DELMAS 2210 (013) 665 6000

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## OFFICE OF THE MM

**SPATIAL PLANNING & LAND USE MANAGEMENT** 

### APPLICATION FORM FOR ISSUING A ZONING CERTIFICATE

#### **GENERAL INFORMATION**

- 1. Lodge your application on this prescribed form.
- 2. Pay the prescribed application fee at the Municipal Offices, Van Der Walt Street, Delmas **OR** make an electronic payment, to the banking details as stated below.
- 3. Proof of electronic payment must be attached to the application form.
- 4. Ensure that all attached documents are in a readable condition. Certificates can only be issued if all documents are in order.
- 5. The applicant must allow **TEN (10)** working days, following the submission, for a certificate.
- 6. The banking details of the Municipality is as follows:

Acc Name: VICTOR KHANYE LOCAL MUNICIPALITY

Bank: STANDARD BANK - DELMAS

Branch Code: 002644 Acc Number: 420526994

Reference: PROP DESCRIPTION & 021201000749

7. AMOUNT PAYABLE: R660

# (PLEASE TYPE INFORMATION)

APPLICATION DATE	
COMPANY NAME	
PO BOX	
TELEPHONE NUMBER	
EMAIL ADDRESS	
CONTACT PERSON	

	PROPERTY DETAILS
PORTION / REMAINDER	
FARM NAME AND	
REGISTRATION NO	
ERF NO	
TOWNSHIP NAME AND	
EXTENSION	
PROPERTY SIZE	
EXISTING LAND USE	
ZONING	
SG DIAGRAM OR	
GENERAL PLAN NO	
SECTIONAL SCHEME	
NAME	
SECTIONAL SCHEME NO	_
AND UNIT NO	
TITLE DEED NO	